0025 Department of Health Services

Toxic Substances Control Division Sacramento, California Please print or type. (Form designed for use on elite (12-bitch) typewriter.) 22-60 Manifest Information in the shaded areas 1. Generator's US EPA ID No. 2. Page 1 UNIFORM HAZARDOUS Document No is not required by Federal **WASTE MANIFEST** <u>n o 8 6 5 1 o o</u> A.State Manifest Document Number 3. Generator's Name and Mailing Address 84924080 Douglas Aircraft Co. 190th & Normandie Ave. B.State Generator's ID Generator's Phone (213-533-6677 Torrance, CA. 90502 Transporter 1 Company Name US EPA ID Number C.State Transporter's ID 6. D.Transporter's Phone IT Corporation
Transporter 2 Company Name <u>0 2 9 6 5 4 8</u> E.State Transporter's IDA J-830-1780 US EPA ID Number F.Transporter's Phone G.State Facility's ID 9. Designated Facility Name and Site Address US EPA ID Number 10 CASMALIA H.Facility's Phone P.O. Box E NTU Road Casmalia, CA, 93429 12.Containers Unit 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Total Quantity Waste No. No. Type Nt/Va a. E 001 Acid Liquid Corrosive NOS TT N 05000 111 E R A T b. 0 R C. d. K Handling Codes for Wastes Listed Above Additional Descriptions for Materials Listed Above Potassium Dichromate 6.0% Water Permit #3-6468 15. Special Handling Instructions and Additional Information Guide #60 Use gloves, goggles, respirator - May cause severe burns to skin and eyes 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations. Date Month Day Year Printed/Typed Name Signature .0 1.2 1/. A. F. Romano

17. Transporter 1 Acknowledgement of Receipt of Materials Date Month Day Year Printed/Typed Name Signature ... Date 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Signature Month Day Year 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Date Month Day Year Printed/Typed Name Signature

NHS 8022 A (11/84) (A 8700-22)

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	3. Generator's Name and Mailing A	190th &	Aircraft Co Normandie A			8	e Maintean Do 492408	0	Number :
	4. Generator's Phone (213-533-	-6677 Torranc	e, CA. 90502				le Generators		A A A A
	5. Transporter 1 Company Name IT Corporation	•	6. US EPA I.C A D Q 2 9	1D Numi			a Transporter		#877
	Transporter 2 Company Name 8. US EPA ID Number						BDOTO: Pho ISTRIBBOTO:	9 IO 8	*83U=178U
	9. Designated Facility Name and CASMALIA	Site Address	10. US EPA	ID Numi	ber	esi S	eporter a Prior a Facility's ID COL 174		
	P.O. Box E NTU Road Casmalia, CA. 93429		.C.A.D.O.2.0.	7.4.8			llity's Prione		
a	11. US DOT Description (Including Pro	per Shipping Name, H	azard Class, and ID	Number)	12.Conta No.	iners Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
E	Acid Liquid Corrosive	NOS NA1760			001	TT	95000 -	G	11 K
E R A						·	4200		
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Guide #60 Use gloves, goggles, respirator - May cause severe burns to skin and eyes									
	above by proper shipping name and	l: I hereby declare that the contents of this consignment are fully and accurately described and are classified, packed, marked, and labeled, and are in all respects in proper condition ording to applicable international and national governmental regulations.							
V	Printed/Typed Name A. F. Romanø		Signature/	18	ma	en	D	Mo	onth Day Year
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TRANSPORTE	Printed/Typed Name 18. fransporter 2 Acknowledgement	DIESTE //S/	Signature	LV.		a/1	Mills fate of	135 MG	nnth Day Year
R T E R	Printed/Typed Name	or modern or mate	Signature					Mo I	Date onth Day Year
	19. Discrepancy Indication Space								
FACI									
LIT	20. Facility Owner or Operator: Certific Item 19. 57729 - 27/	cation of receipt of ha	zardous materials c	overed by	y this mar	nifest e	xcept as noted	in	Date

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS

Signature

To: P.O. Box 3000, Sacramento CA 95812

84 89641

Month Day Year

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Printed/Typed Name

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